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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	☐ Chapter 12 ☐ Chapter 13

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Omar First name	First name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport	Middle name Tarpley	Middle name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social Security number or	XXX - XX- 9780 OR	XXX - XX
federal Índividual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	ebtor 1 Omar First Name	Tarpley  Middle Name Last Name	Case number (if known)
_	THSUNAINC	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		661W Rock St Apt 661 Number Street	Number Street
		Plano Illinois 60545	
		City State Zip Code	City State Zip Code
		Kendall County	County
		•	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to
		notices to you at this mailing address.	this mailing address.
		Number Street	Number Street
_		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	ebtor 1 Omar		Tarpley	Case number (if ki	no wn)
	First Name	Middle Name	Last Name		
Pa	rt 2: Tell the Court Abo	ut Your Bankruptcy Ca	ase		
7.	The chapter of the Bankruptcy Code you are choosing to file under		description of each, see <i>Notice I</i> 0)). Also, go to the top of page 1		C. § 342(b) for Individuals Filing for ropriate box.
8.	How you will pay the fee	more details about cashier's check, or may pay with a cred  I need to pay the findividuals to Pay  I request that my finding may, but is not the official poverty you choose this open.	how you may pay. Typically, is money order. If your attorney dit card or check with a pre-profee in installments. If you che Your Filing Fee in Installments fee be waived (You may required to, waive your fee line that applies to your family	f you are paying the is submitting you inted address.  ose this option, sign (Official Form 10 est this option only and may do so or y size and you are	the clerk's office in your local court for the fee yourself, you may pay with cash, or payment on your behalf, your attorney and attach the <i>Application for</i> 3A).  If you are filing for Chapter 7. By law, a sally if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
9.	Have you filed for bankruptcy within the last 8 years?	Ves. District District District	WI	mm / DD / YYYY en	Case number  Case number  Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District		nen MM / DD / YYYY nen MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent your residence?	✓ No. Go to			nst You (Form 101A) and file it with

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Debtor 1 Omar Tarplev Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Omar Tarpley Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Omar First Name	Middle Nesse	Tarpley	Case number (if known)	·
	Middle Name estions for Reporting P	Last Name		
16. What kind of debts do you have?	16a. Are your debts p "incurred by an in No. Go to line Yes. Go to line 16b. Are your debts p money for a busin No. Go to line Yes. Go to line	rimarily consumer debts adividual primarily for a per e 16b. ae 17. arimarily business debts? aress or investment or thro e 16c.	rsonal, family, or househ  Business debts are debt  ugh the operation of the	s that you incurred to obtain business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under expenses are p	nder Chapter 7. Go to line 18 r Chapter 7. Do you estimate paid that funds will be availab	that after any exempt prop	perty is excluded and administrative d creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5 ☐ 5,001-1 ☐ 10,001		25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,00 \$500,001-\$1 million	\$10,000 00 \$50,000	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,00 \$500,001-\$1 millio	\$10,000 00 \$50,000	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below		Airian and Independent		
For you	correct.  If I have chosen to file to of title 11, United State under Chapter 7.	under Chapter 7, I am awa es Code. I understand the	re that I may proceed, if e relief available under eac	he information provided is true and eligible, under Chapter 7, 11,12, or 13 h chapter, and I choose to proceed ho is not an attorney to help me fill
		ave obtained and read the i		
	=	·		ode, specified in this petition.
	connection with a bank			money or property by fraud in imprisonment for up to 20 years, or
	/s/ Omar Tarpley		×	
	Signature of Debtor 1		Signature of D	Debtor 2
	Executed on8,	/2/2018 MM / DD / YYYY	Executed or	n

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Debtor 1 Omar		Tarpley	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one If you are not	eligibility to proceed und relief available under each	der Chapter 7, 11, 12 ch chapter for which	e, or 13 of title 11, United the person is eligible. I a	ave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the which § 707(b)(4)(D) applies, certify that I
represented by an	. ,			ules filed with the petition is incorrect.
attorney, you do not	· ·	, , ,		
need to file this page.	/s/ James Nowak		Date	8/2/2018
	Signature of Attorney f	or Debtor	M	M / DD / YYYY
	James Nowak			
	Printed name			
	Semrad Law Firm			
	Firm name			
	1444 N. Farnsworth A	Avenue		
	Street			
	Suite 300			
	Aurora		Illinois	60505
	City		State	Zip Code
	Contact phone	3122568701	Email address	jnowak@semradlaw.com
	6324423		Illinois	<u> </u>
	Bar number		State	

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Fill in this infor	mation to identify your c	ase:			
Debtor 1 Omar Tarpley					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Sankruptcy Court for the:	Northern	District of Illinois		
Case number (If known)			(State)		

Check if this is an
amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$13,225.00
1b. Copy line 62, Total personal property, from Schedule A/B	
1c. Copy line 63, Total of all property on Schedule A/B	\$13,225.00
art 2: Summarize Your Liabilities	
	<b>Your liabilities</b> Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Фол 400 00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$25,468.00
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$128,717.00
Your total liabilities	\$154,185.00
Part 3: Summarize Your Income and Expenses	
. Schedule I: Your Income (Official Form 106I)	\$3,423.27
Copy your combined monthly income from line 12 of Schedule I	
. Schedule J: Your Expenses (Official Form 106J)	
. Schedule 3. Tour Expenses (Official Form 1999)	\$2,738.00

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Deb	tor 1 Omar		Tarpley	Case number (if known)	
	First Name	Middle Name	Last Name		
Part	4: Answer These Question	ons for Administrat	ive and Statistical Records		
6. <b>A</b>	re you filing for bankruptcy un	der Chapters 7, 11, o	r 13?		
Г	No. You have nothing to repo	ort on this part of the fo	rm. Check this box and submit this	form to the court with your other so	chedules.
	✓ Yes.	·		·	
Ľ	<u>v</u>				
7. <b>W</b>	/hat kind of debt do you have?				
Ŀ			mer debts are those incurred by an ill out lines 8-10 for statistical purpo		
		• ( )	• •	ŭ	
L	this form to the court with yo		u have nothing to report on this pa	art of the form. Check this box and s	ubmit
	From the Statement of Your Co Form 122A-1 Line 11; OR, Form		e: Copy your total current monthly rm 122C-1 Line 14.	income from Official	\$1,225.30
	, ,	. ,			
9.	Copy the following special ca	tegories of claims fro	m Part 4, line 6 of Schedule E/F:		
	From Part 4 on Schedule E/F	copy the following:		Total claim	
				••••	
	9a. Domestic support obligation	is (Copy line 6a.)		\$0.00	
	9b. Taxes and certain other deb	ts you owe the governr	ment. (Copy line 6b.)	\$0.00	
	9c. Claims for death or persona	l iniury while you were i	ntoxicated. (Copy line 6c.)	\$0.00	
	·		(,	\$81,998.00	
	9d. Student loans. (Copy line 6	i.)		· ,	
	9e. Obligations arising out of a priority claims. (Copy line 6g.)	separation agreement o	r divorce that you did not report as	\$0.00	
	priority claims. (Copy line 6g.)			<b>#0.200.00</b>	
	9f. Debts to pension or profit-sl	naring plans, and other	similar debts. (Copy line 6h.)	\$2,300.00	

\$84,298.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this	information to identify your	case:			
Debtor 1	Omar		Tarpley		
Debtor 2	First Name	Middle N	ame Last Name		
(Spouse, if fil	First Name	Middle N	ame Last Name		
United Sta	ates Bankruptcy Court for the	: Northern	District of Illinois		
Case num (If known)	ber		(State)		
Officia	I Form 106A/B				Check if this is an amended filing
Sched	dule A/B: Prop	erty			12/1
category w responsibl write your	where you think it fits best. e for supplying correct info name and case number (if	Be as complete and primation. If more spin known). Answer ex	st an asset only once. If an asset fits in more nd accurate as possible. If two married peoplo pace is needed, attach a separate sheet to the very question. nd, or Other Real Estate You Own or Ha	e are filing together, both a is form. On the top of any	are equally
		_	n any residence, building, land, or similar pro		
<b>✓</b>	No. Go to Part 2				
	Yes. Where is the property?				
1.1	Street address, if available, o	r other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
			Condominium or cooperative  Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Number Street  City State	Zip Code	Land Investment property Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
			Who has an interest in the property? Check	Check if this is co (see instructions)	ommunity property
			one.		
			Debtor 1 only		
			Debtor 2 only  Debtor 1 and Debtor 2 only		
			At least one of the debtors and another		
			Other information you wish to add about thi	s item, such as local	
If you	own or have more than one,	list here:	property identification number:		
1.2	Street address, if available, o	r other description	What is the property? Check all that apply.  Single-family home	the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D:</i> aims Secured by Property.
			Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Number Street		Land		
	Number Street		Investment property Timeshare	Describe the nature of interest (such as fee state the entireties, or a life	simple, tenancy by
	City State	Zip Code	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		ommunity property
			Other information you wish to add about thi property identification number:	s item, such as local	

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1.3		[	Last Name  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.  Current value of the portion you own?
Street a	er Street	[	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land	the amount of any secu Creditors Who Have Clar Current value of the	red claims on Schedule D: ims Secured by Property.  Current value of the
City	State Z	Ļ		Describe the nature of	your ownership
		ip Code	Timeshare Other	interest (such as fee si the entireties, or a life	estate), if known.
		v [ [ [	Who has an interest in the property? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is containe. (see instructions)	nmunity property
			Other information you wish to add about this property identification number:	item, such as local	
you have a	e dollar value of the portic attached for Part 1. Write 	-	III of your entries from Part 1, including any eere. ▶	entries for pages	
ou own that		lease a vehicle,	in any vehicles, whether they are registered also report it on Schedule G: Executory Contract cycles	-	
Mo Ye	lodel: E ear: 2	Buick Enclave 012	Who has an interest in the property? Che one.  Debtor 1 only	the amount of any secu	claims or exemptions. Put irred claims on Schedule D: aims Secured by Property.
Ot	pproximate mileage: ther information: 012 Buick Enclave		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property? \$10225.00	Current value of the portion you own? \$10225.00
			Check if this is community property (sinstructions)	3 <del>00</del>	
	lodel: ear:		Who has an interest in the property? Che one.  Debtor 1 only	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: nims Secured by Property.
	pproximate mileage:		Debtor 2 only	Current value of the	Current value of the

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tor 1	Omar		Tarpley Case num	ider (it known)	
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secu Creditors Who Have Cla Current value of the entire property?	claims or exemptions. Pured claims on Schedule aims Secured by Property  Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage:		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	the amount of any sect Creditors Who Have Cla	claims or exemptions. Pured claims on Schedule aims Secured by Property
	Other information:		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
			At least one of the debtors and another  Check if this is community property (see		
Exar	nples: Boats, trailers, motors, pe	•	instructions)  r recreational vehicles, other vehicles, and ac fishing vessels, snowmobiles, motorcycle access	ccessories	
	nples: Boats, trailers, motors, pe No Yes	•	instructions)	ccessories cories  Do not deduct secured	
Exar	nples: Boats, trailers, motors, per No Yes  Make Model: Year: Approximate mileage:	•	instructions)  r recreational vehicles, other vehicles, and active fishing vessels, snowmobiles, motorcycle access  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	Do not deduct secured the amount of any secured creditors Who Have Cla	claims or exemptions. Fured claims on Schedule aims Secured by Propert
Exar	nples: Boats, trailers, motors, pe No Yes Make Model: Year:	•	instructions) r recreational vehicles, other vehicles, and activation of the common of	Do not deduct secured the amount of any secured the deduct secured the amount of the current value of the entire property?	ured claims on <i>Schedule</i> aims Secured by Propen
4.1	Make Model: Approximate mileage: Other information:  Make Model: Year: Approximate mileage:  Other information:	•	who has an interest in the property? Check one.  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured the amount of any secured the amount of the entire property?  Do not deduct secured the amount of any secured the amount of any secured the amount of any secured the secured th	claims or Schedule control of the portion you own?
4.1	nples: Boats, trailers, motors, per No  Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model:	•	who has an interest in the property? Check one.  Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured the amount of any secured the amount of the entire property?  Do not deduct secured the amount of any secured the amount of any secured the amount of any secured the secured th	ured claims on Schedule aims Secured by Propert Current value of the

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De	ebtor 1	Omar First Name	Middle Name	Tarpley Last Name	Case number (if known)	
Pa	rt 3:		our Personal and Housel			
D	o you	own or hav	e any legal or equitable i	nterest in any of the follo	wing items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
		_	and furnishings liances, furniture, linens, china,	, kitchenware		
✓	No Yes. D	Describe	Used Furniture			\$350.00
	Examp	ronics les: Television	s and radios; audio, video, ster	reo, and digital equipment; com	nputers, printers, scanners; music	
<u> </u>	No Yes. D	Describe	Used Electronics			\$600.00
		•	and figurines; paintings, prints,	or other artwork; books, pictur; other collections, memorabilia	· ·	
		Describe				
		les: Sports, ph	rts and hobbies lotographic, exercise, and othe s; carpentry tools; musical inst		pool tables, golf clubs, skis; canoes	
✓	No Yes. D	Describe	Music Equipment (Used Guita	r, Used Tumtable, Used Music	production equipment)	\$1000.00
	<b>0. Fire</b> Examp		es, shotguns, ammunition, and	d related equipment		
<b>✓</b>	No Yes. D	Describe				· -
	1. Clot Examp		clothes, furs, leather coats, des	igner wear, shoes, accessories		
✓	No Yes. D	Describe	Used Clothing			\$300.00
	•		, , , ,	gement rings, wedding rings, h	eirloom jewelry, watches, gems,	
	No Yes. D	Describe				
		-farm animal les: Dogs, cat	s, birds, horses			
<b>✓</b>	No Yes. D	Describe				
1	4. Any	other persor	al and household items you	did not already list, includin	g any health aids you did not list	
<b>✓</b>	No					
	Yes. D	Describe				
			-		es for pages you have attached	\$2250.00

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Debt	tor 1 Omar		Tarpley	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	Describe Your F	Financial Assets			
Do	you own or have an	y legal or equitable interest	in any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
16.					
E	<b>✓</b> No	ve in your wallet, in your home, in	·	nand when you file your petition	
	Yes			Cash:	
17.		avings, or other financial accounts; stitutions. If you have multiple acc		s in credit unions, brokerage houses, on, list each.	
	✓ No  Yes		Institution name:		
		17.1. Checking account:			
		17.2. Checking account:			
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.	Examples: Bond funds,	or publicly traded stocks , investment accounts with brokers	age firms, money market acc	ounts	
	✓ No  Yes	Institution or issuer name:			
					·
19.	Non-publicly traded s		ed and unincorporated bu	sinesses, including an interest in	
	✓ No	•			
	Yes. Give specific information about	Name of entity		% of ownership:	
	them				

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Debt	tor 1 Omar		Tarpley	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments Non-negotiable instrum	orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe	checks, promissory not	es, and money orders.	
	Yes. Give specific information about them	Issuer name:			
					-
					-
21.	Retirement or pension		thrift savings accounts	, or other pension or profit-sharing plans	
	No No	in, Ellion, Reogli, 401(k), 400(b)	, tillit savings accounts	, or other pension of profit-straining plans	
	Yes. List each	Type of account:	Institution name:		
	account	401(k) or similar plan:			
	separately.				
		Pension plan:	-		
		IRA:			
		Retirement account:			-
		Keogh:			
		Additional account:			
		Additional account:	-		
22.		d deposits you have made so that			
	companies, or others	with landlords, prepaid rent, publi	c utilities (electric, gas, w	ater), telecommunications	
	No		Institution name:		
	✓ Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:	<del></del>		
		Prepaid rent:	DLT Properties		\$750.00
		Telephone:	<u>DET Froperties</u>		
		Water:			
		Rented furniture:			
		Other:			
23.		or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No	Issuer name and description:			
	Yes				

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Debte	or 1 Omar		Tarpley	Case number (if known)	
0.4	First Name	Middle N		an a suclified state tuition program	
24.		(b)(1), 529A(b), and 529(	ount in a qualified ABLE program, or unde b)(1).	er a qualified state tuition program.	
	✓ No				
	Yes	titution name and descrip	tion. Separately file the records of any interes	ts.11 U.S.C. § 521(c):	
	_				
25.	Trusts, equitable	or future interests in p	roperty (other than anything listed in line	1), and rights or powers	
	exercisable for y	our benefit			
	<b>✓</b> No				
	Yes. Describe				
26.			secrets, and other intellectual property s, proceeds from royalties and licensing agree	omonte	
	- N	t domain names, website	s, proceeds norn royalities and licensing agree	andita	
	✓ No  Yes. Describe				
0.7			internalists o		
27.		<b>ises, and other general</b> g permits, exclusive licens	intangibles ses, cooperative association holdings, liquor l	icenses, professional licenses	
	<b>✓</b> No				
	Yes. Describe				
	_				
Mon	nev or property	owed to you?			Current value of the
Mon	ney or property	owed to you?			Current value of the portion you own?
Mon	ney or property (	owed to you?			portion you own? Do not deduct secured
					portion you own?
	Tax refunds owed				portion you own? Do not deduct secured
	Tax refunds owed  ✓ No			Federal:	portion you own? Do not deduct secured
	Tax refunds owed  ✓ No  — Yes. Give specabout the	to you  bific information bem, including whether			portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed  No Yes. Give specabout the you alrea	to you		State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds owed  No Yes. Give specabout the you alread and the to	to you  bific information bem, including whether dy filed the returns			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed  No Yes. Give specabout the you alread and the testing the support.	to you  cific information em, including whether dy filed the returns ax years	pousal support, child support, maintenance,	State:  Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed  No Yes. Give specabout the you alread and the testing the support.	to you  cific information em, including whether dy filed the returns ax years	pousal support, child support, maintenance,	State:  Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed  No Yes. Give specabout the you alreated and the text.  Family support Examples: Past due.	to you  bific information bem, including whether dy filed the returns ax years	pousal support, child support, maintenance,	State:  Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed  No Yes. Give specabout the you alreated and the text.  Family support Examples: Past due.	to you  cific information em, including whether dy filed the returns ax years	pousal support, child support, maintenance,	State:  Local:  divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed  No Yes. Give specabout the you alreated and the text.  Family support Examples: Past due.	to you  bific information bem, including whether dy filed the returns ax years	pousal support, child support, maintenance,	State:  Local:  divorce settlement, property settlement  Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00
28.	Tax refunds owed  No Yes. Give specabout the you alreated and the text.  Family support Examples: Past due.	to you  bific information bem, including whether dy filed the returns ax years	pousal support, child support, maintenance,	State:  Local:  divorce settlement, property settlement  Alimony:  Maintenance:  Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00
28.	Tax refunds owed  No Yes. Give specabout the you alreated and the text.  Family support Examples: Past due.	to you  bific information bem, including whether dy filed the returns ax years	pousal support, child support, maintenance,	State: Local:  divorce settlement, property settlement  Alimony:  Maintenance:  Support:  Divorce settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed  ✓ No  Yes. Give spectors about the you alreated and the total support Examples: Past due  ✓ No  Yes. Give spectors about the your alreated and the total support the year of the ye	to you  cific information em, including whether dy filed the returns ax years	pousal support, child support, maintenance,	State:  Local:  divorce settlement, property settlement  Alimony:  Maintenance:  Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00
29.	Tax refunds owed  ✓ No  Yes. Give spectors about the you alreated and the total support and the support and support and the s	to you  bific information bem, including whether dy filed the returns ax years  be or lump sum alimony, so bific information	e payments, disability benefits, sick pay, vaca	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed  No Yes. Give spect about the you alreat and the the second of the se	to you  bific information bem, including whether dy filed the returns ax years  be or lump sum alimony, so bific information		State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed  ✓ No  Yes. Give spect about the you alreat and the text spect and the text spect of the properties of the properties. Past due to the properties of the pro	ific information em, including whether dy filed the returns ax years e or lump sum alimony, s dific information	e payments, disability benefits, sick pay, vaca	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed  ✓ No  Yes. Give spect about the you alreat and the text spect and the text spect of the properties. Past due of the properties of the pro	ific information em, including whether dy filed the returns ax years e or lump sum alimony, s dific information	e payments, disability benefits, sick pay, vaca	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Omar		Tarpley	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance po Examples: Health, disability		alth savings account (HSA); credit, ho	omeowner's, or renter's insurance	
	No Yes. Name the insuran of each policy and list		Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property to If you are the beneficiary of property because someoned No Yes. Describe	a living trust, expect	someone who has died proceeds from a life insurance policy	, or are currently entitled to receive	
33.			you have filed a lawsuit or made a urance claims, or rights to sue	a demand for payment	
34.	Other contingent and un to set off claims  No Yes. Describe	liquidated claims of	every nature, including counterc	laims of the debtor and rights	
35.	Any financial assets you  No Yes. Describe	did not already list			
36.		-	n Part 4, including any entries for		\$750.00
Part	5: Describe Any Busi	ness-Related Pro	perty You Own or Have an In	terest In. List any real estate in Par	t1.
37.	Do you own or have any l  No. Go to Part 6.  Yes. Go to line 38.	egal or equitable in	terest in any business-related pro		Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or c	ommissions you alro	eady earned		л ехетриона
	Yes. Describe				
39.			e, modems, printers, copiers, fax ma	chines, rugs, telephones, desks, chairs, elec	tronic devices
	Yes. Describe				

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Deb	tor 1 Omar	Tarpley	Case number (if known)	
ı	First Name	Middle Name Last Name		
40.	Machinery, fixtures, e	quipment, supplies you use in business, and tools of y	our trade	
	<b>✓</b> No			
	Yes. Describe			
	-			
41.	Inventory			
	<b>✓</b> No			
	Yes. Describe			
	Ш			
42.	Interests in partnersh	ps or joint ventures		
	✓ No			
	Yes. Give specific	Name of entity:	% of ownership:	
	information about			
	them			
				_
43.	Customer lists, mailing	lists, or other compilations		
	—			
	No No No No No No No No		11000 \$ 101/414\\\\0	
	Tes. Do your lists if	clude personally identifiable information (as defined in 11	U.S.C. § 101(41A))?	
	No			
	Yes. Desc	ibe		
				· <u>·</u>
44.	Any business-related	property you did not already list		
	No			
	lacksquare			
	Yes. Give specific information			
				<del></del>
				<del>_</del>
				<u> </u>
		ll of your entries from Part 5, including any entries fo		
for Pa	art 5. Write that numbe	r here		
	Describe Any Fa	rm- and Commercial Fishing-Related Proper	by You Own or Have an Interest In	
Part	If you own or have an	interest in farmland, list it in Part 1.	ly rou own or riaro arrintorout in	
16	Do you own or hove o	ny legal or equitable interest in any farm- or commer	raial fishing related property?	
46.	Do you own or have a	iy legal or equitable interest in any larin- or commer	cial listiling-related property:	Current value of the
	No. Go to Part 7.			portion you own?
	Yes. Go to line 47.			Do not deduct secured claims
	_			or exemptions
47.	Farm animals	sultry, form roland fish		
	Examples: Livestock, p	ounry, ramm-raiseu nsm		
	<b>✓</b> No			
	Yes. Describe			

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Debt	or 1 Omar First Name		arpley C	Case number (if known)	
48.	Crops-either growing of		ast ivallie		
	No No				
	Yes. Describe				
	_				
49.	Farm and fishing equip	ment, implements, machinery, fixture	s, and tools of trade		
	<b>√</b> No				
	Yes. Describe				
	_				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
51.	Any farm- and commer	rcial fishing-related property you did n	ot already list		
	<b>✓</b> No				
	Yes. Describe				
52. Ad	dd the dollar value of al	I of your entries from Part 6, including	any entries for pages you	have attached	
		here			
				_	
Part 7	7: Describe All Pro	perty You Own or Have an Intere	st in That You Did Not I	List Above	
53.		perty of any kind you did not already li s, country club membership	st?		
	✓ No	,,,			
	Yes. Give specific				
	information				
E4 A4	dd the deller velue of el	Lafvaur antrica from Bart 7. Write the	st number bere	1	
54. A	du the dollar value of al	l of your entries from Part 7. Write tha	it number here		
Part 8	List the Totals of	Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate	, line 2		<b>&gt;</b>	
		,			
56. <b>p</b>	oart 2 total vehicles, line	e 5	\$10225.00		
57. <b>P</b>	art 3: Total personal an	d household items, line 15	\$2250.00		
58. <b>P</b>	art 4: Total financial as	sets, line 36	\$750.00		
59. <b>F</b>	Part 5: Total business-re	elated property, line 45			
60. <b>F</b>	Part 6: Total farm- and f	ishing-related property, line 52			
61. <b>F</b>	Part 7: Total other prope	erty not listed, line 54			
62. <b>T</b>	Total personal property.	Add lines 56 through 61	\$13225 OO		, \$12225 OO
	· · ·		\$13225.00	Copy personal property total	+ \$13225.00
					\$13225.00
63. <b>T</b>	otal of all property on S	chedule A/B. Add line 55 + line 62			

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Fill	in this inforr	nation to identify your ca	ase:			
Deb	otor 1	Omar		Tarpley		
		First Name	Middle Name	Last Name		
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name		
Uni	ted States B	ankruptcy Court for the:	Northern E	District of Illinois		
		. ,		(State)		
	se number lown)					
Of	ficial	orm 106C			_	Check if this is an amended filing
Sc	hedul	C: The Prop	erty You Claim a	s Exempt		04/16
info as e addi	rmation. Uxempt. If ritional pag	Ising the property you nore space is needed, es, write your name a	ulisted on Schedule A/B: fill out and attach to this and case number (if known	page as many copies of Pa	SA/B) as your source, list art 2: Additional Page as	the property that you claim necessary. On the top of any
tax- und you	exempt ro er a law t r exempti	etirement funds—ma hat limits the exemp	ay be unlimited in dollar a tion to a particular dollar to the applicable statutor	amount. However, if you or amount and the value of	laim an exemption of 1	eive certain benefits, and 00% of fair market value ned to exceed that amount,
1.			<del>-</del>	ven if your spouse is filing with	VOU.	
١.			deral nonbankruptcy exemp	· · · · · ·	you.	
		_	mptions. 11 U.S.C. § 522(b)(			
2.	_			exempt, fill in the information	below.	
		ription of the property a		Amount of the exemption y	ou claim Specif	ic laws that allow exemption
	property	neddie A/B that hots th	own	Check only one box for each	exemption.	
			Copy the value from Schedule A/B			
	Brief		A		735	ILCS 5/12-1001(c); 735 ILCS
	description	Enclave, 2012,	\$10,225.00	<b>✓</b>		5/12-1001(b)
		Buick Enclave		100% of fair market va		
	Line from Schedule	<i>VB:</i> 03		applicable statutory lim	π	
	Brief					735 ILCS 5/12-1001(b)
	description	: Furniture	\$350.00	\$350.0	00	
	Line from Schedule	,		100% of fair market va applicable statutory lim		
3.	-	_	temption of more than \$160, and every 3 years after that for	375? cases filed on or after the date of	of adjustment.)	
	No.					

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Omar Tarplev Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$600.00 description:  $\checkmark$ \$600.00 **Used Electronics** 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 07 Brief 735 ILCS 5/12-1001(b) \$1,000.00 description: **✓** \$1,000.00 Music Equipment (Used 100% of fair market value, up to any Guitar, Used Turntable, applicable statutory limit **Used Music production** equipment) Line from 09 Schedule A/B: 735 ILCS 5/12-1001(a) \$300.00 description: **✓** \$300.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$750.00 description: **✓** \$750.00 Prepaid rent, DLT 100% of fair market value, up to any **Properties** 

applicable statutory limit

Line from Schedule A/B:

22

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			DC	cument	Paye 22 01 1	1		
Fill in t	his inforr	nation to identify your ca	ase:					
Debtor	1	Omar		Tarpley	,			
		First Name	Middle Name	Last Na				
Debtor (Spouse,		First Name	Middle Nove	L aat Ni				
(Opouse,	,g)	FIRST Name	Middle Name	Last Na	ame			
United	States B	ankruptcy Court for the:	Northern	District of Illi	nois tate)			
Case n								
Offic	cial I	Form 106D						Check if this is an amended filing
			\\\\\       -	Ola!		al lass Duasa	<b>!</b>	amended filling
<u>Scn</u>	ieau	ie D: Credit	ors Who Ha	ve Ciaii	ms Secure	a by Prop	erty	12/15
more sp name a	pace is r ind case	needed, copy the Addition number (if known).	ble. If two married peoplonal Page, fill it out, nur	nber the entrie	•	•		
1. D	_ •		mit this form to the court	•	schedules Vou have	e nothing else to rend	ort on this form	
	≝			with your other	Scriedules. Tou nave	e nouning else to repo	ort off tries forth.	
		Fill in all of the informatio	it below.					
Part 1	List A	All Secured Claims						
			itor has more than one sec han one creditor has a par			Column A	Column B	Column C
		•	ne claims in alphabetical or			Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
		AN CREDIT ACCEPT	- Describe the property	that secures	the claim:	\$25,468.00	\$10,225.00	\$15,243.00
	Creditor's 961 E M		2012 Buick Enclave	,				
•	Numbe		As of the date you file	e, the claim is:	Check all that apply.			
			_ Contingent					
	SPARTA		Unliquidated					
	City Who ow	State ZIP Code es the debt? Check one.	Disputed					
		tor 1 only	Nature of lien. Check	all that apply.				
	Debt	tor 2 only		made (such as	mortgage or secured			
	Deb1	tor 1 and Debtor 2 only	car loan)		ala antiala lian)			
		ast one of the debtors	Statutory lien (such		chanic's lien)			
	Che	another ck if this claim relates	Judgment lien from Other (including a r					
	to a Date del incurred		Last 4 digits of accou	ınt number	1001			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$25,468.00

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Fill i	n this inforr	nation to identify your c	ase:					
Deb	tor 1	Omar	Marilla Maria	Tarpley				
Dala	· · · · 0	First Name	Middle Name	Last Name				
Deb	tor 2 use, if filing)	First Name	Middle Name	Last Name				
(оро	acc,g,	i iist ivaille	Wildlie Name	Last Name				
Unit	ed States B	ankruptcy Court for the:	Northern	District of Illinois (State)				
Case (If knd	e number own)							
Off	icial Fo	orm 106E/F				Che	eck if this is an	n amended filing
Sc	hedu	le E/F: Cre	ditors Who	Have Uns	secured Claims			12/15
Form clain the e know	106A/B) ans that are entries in the that are entries in the entrie	and on Sc <i>hedule G: Exe</i> listed in <i>Schedule D: C</i> ne boxes on the left. At	cutory Contracts and Une reditors Who Hold Claims	expired Leases (Office Secured by Proper	aim. Also list executory contractial Form 106G). Do not include by. If more space is needed, copy the top of any additional pages,	any creditor the Part y	rs with partia ou need, fill i	ally secured t out, number
1.	-	editors have priority un Go to Part 2.	secured claims against y	ou?				
2.	listed, iden As much a Continuati	tify what type of claim it as possible, list the claims on Page of Part 1. If mor	is. If a claim has both priorit	y and nonpriority ame ding to the creditor's particular claim, list th		both priorit	y and nonprio	rity amounts.
						Total claim	Priority amount	Nonpriority amount

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Debte	or 1	Omar Tarpley First Name Middle Name Last Nar		
Dort :	2.	List All of Your NONPRIORITY Unsecured Claims	me	
Part 3.		any creditors have nonpriority unsecured claims against you?		
J		No. You have nothing to report in this part. Submit this form to	the court with your other schedules.	
[	✓	Yes.		
l I	unse f m	ecured claim, list the creditor separately for each claim. For each clair	rder of the creditor who holds each claim. If a creditor has more m listed, identify what type of claim it is. Do not list claims already in in Part 3.If you have more than four priority unsecured claims fill out	cluded in Part 1. t the Continuation
		50/50 PT10		Total claim
4.1	No	ES/FORTIS onpriority Creditor's Name O. Box 2461	- Last 4 digits of account number 0004  When was the debt incurred? 7/2002	\$51,740.00
	Nı	umber Street	As of the date you file, the claim is: Check all that apply.	
	_		Contingent	
	_	arrisburg Pennsylvania 17105 ity State Zip Code	- Unliquidated	
		ho incurred the debt? Check one.	Disputed	
	Ľ	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	L	Debtor 2 only	✓ Student loans	
	L	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Ł	At least one of the debtors and another  Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	L Is	the claim subject to offset?	debts Other. Specify	
	~	No		
		Yes		
4.2		ES/FORTIS	Last 4 digits of account number 0003	\$30,258.00
		onpriority Creditor's Name O. Box 2461	When was the debt incurred? 7/2002	
	N	umber Street	As of the date you file, the claim is: Check all that apply.	
	_		Contingent	
	_	arrisburg Pennsylvania 17105 ity State Zip Code	Unliquidated	
	W	ho incurred the debt? Check one.	Disputed	
	Ľ	Debtor 1 only  Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	F	Debtor 1 and Debtor 2 only	✓ Student loans	
	F	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	F	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	L Is	the claim subject to offset?	Other. Specify	
	~	<b>/</b> No	_	
		Yes		
4.3		FNI onpriority Creditor's Name	Last 4 digits of account number	\$1,200.00
	13	310 Martin Luther kIng Drive	When was the debt incurred?n/a	
		umber Street	As of the date you file, the claim is: Check all that apply.	
	P	O BOX 3517	Contingent	
	_	loomington Illinois 61702	Unliquidated	
		ity State Zip Code  /ho incurred the debt? Check one.	Disputed	
	V	Debter 1 anh	Type of NONPRIORITY unsecured claim:	
	Ē	Debtor 2 only	Student loans  Obligations origing out of a consertion agreement or	
		Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
		Check if this claim relates to a community debt	✓ Other. Specify	
	Is	the claim subject to offset?	<del></del>	
	Ľ	✓ No ✓ Yes		

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Debtor 1 Omar Tarplev Case number (if known) Middle Name First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Bank of America \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 982236 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 79998 El Paso Texas City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ debt V Is the claim subject to offset? No Yes CAPITAL ONE AUTO FINAN \$9,399.00 Last 4 digits of account number \_\_ 1001 Nonpriority Creditor's Name When was the debt incurred? 6/2012 3901 DALLAS PKWY Street Number As of the date you file, the claim is: Check all that apply. Contingent **PLANO** 75093 Texas Unliquidated City State Zip Code Disputed Who incurred the debt? Check one.  $\overline{\phantom{a}}$ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 072 Automobile Is the claim subject to offset?  $\overline{\mathbf{v}}$ **✓** No Yes Capital One Bank \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 5253 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Carol Stream 60197 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify \_

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Debtor 1 Omar Tarplev Case number (if known) Middle Name First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Cash Call \$11,000.00 Last 4 digits of account number Nonpriority Creditor's Name 1 City Blvd W Ste 1000 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 92868 California Orange City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ debt V Is the claim subject to offset? No Yes 4.8 Chase Bank \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a P.O. Box 659732 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated San Antonio Texas 78265 City Disputed Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify debt V Is the claim subject to offset? **✓** No Yes CITIZENS BANK \$1,000.00 4.9 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 1000 LAFAYETTE BLVD Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated BRIDGEPORT Connecticut 06604 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt

**V** No Yes

Is the claim subject to offset?

Other. Specify

debt

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Debtor 1 Omar Tarplev Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 ComEd \$680.00 - Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center Number Street As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ debt Is the claim subject to offset? No ◪ ☐ Yes CONVERGENT OUTSOURCING \$1,145.00 Last 4 digits of account number \_ 5420 Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 When was the debt incurred? 2/2018 Street As of the date you file, the claim is: Check all that apply. Contingent 77043 Houston Texas Unliquidated Citv State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: DISH **✓** No **NETWORK** Other. Specify Yes **DLT Properties** \$3,200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 202 W Main St Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Plano Illinois 60545 City State Zip Code Disputed Who incurred the debt? Check one Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Past due rent Is the claim subject to offset? No

Yes

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Debtor 1 Omar Tarplev Case number (if known) Middle Name First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 ENHANCED RECOVERY CO L \$718.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 2/2018 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? ✓ ORIGINAL CREDITOR: AT T Other. Specify WIRELINE Yes 4.14 First National Collection Bureau, Inc \$1,540.00 Last 4 digits of account number Nonpriority Creditor's Name 610 Waltham Way When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 89434 Sparks Nevada Citv State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ debt Is the claim subject to offset? **✓** No Yes Harris and Harris LTD \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 111 W Jackson Blvd Number As of the date you file, the claim is: Check all that apply. Suite 600 Contingent Unliquidated Chicago Illinois 60604 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset?

No Yes

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Debtor 1 Omar Tarplev Case number (if known) Middle Name First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** HERTG ACCPT 4.16 \$5,193.00 - Last 4 digits of account number 5801 Nonpriority Creditor's Name 1420 S MICHIGAN When was the debt incurred? 4/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent SOUTH BEND 46556 Indiana Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify 42 Automobile Is the claim subject to offset? **✓** No Yes 4.17 Illinois Department of Employment Security Benefit Collections \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6996 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60606 Chicago Citv State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify debt Is the claim subject to offset? **✓** No Yes 4.18 Medical Business Bureau, LLC \$25.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 1219 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Park Ridge Illinois 60068 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset?

No Yes

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Debtor 1 Omar Tarplev Case number (if known) Middle Name First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 Nandra Family Practice \$30.00 Last 4 digits of account number Nonpriority Creditor's Name 115 E South St. UNIT F When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60545 Illinois Plano City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ debt Is the claim subject to offset? No Yes Northland Group Inc \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 390846 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Minneapolis Minnesota 55439 Disputed Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Debt Is the claim subject to offset? **✓** No Yes Northwestern Medicine \$1,000.00 4.21 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 4090 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Carol Stream Illinois 60197 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify debt Is the claim subject to offset? **V** No

Yes

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Debtor 1 Omar Tarplev Case number (if known) Middle Name First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 Pendrick Capital Partners II LLC \$2,300.00 - Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 625 US-1 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 33040 Florida Key West City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? No ◪ ☐ Yes PLS F/K/A The Payday Loan of Illinois Inc. \$1,100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 800 Jorie Blvd 2nd Floor As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Oak Brook Illinois 60523 Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify debt Is the claim subject to offset? **✓** No Yes RENTDEBT AUTOMATED COL \$3,739.00 4.24 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/2013 2802 OPRYLAND DR Number Street As of the date you file, the claim is: Check all that apply. Contingent NASHVILLE 37214 Tennessee Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? |✓| ORIGINAL CREDITOR: MADERA No Other. Specify BRENTWOOD/MADERA RESIDE

Yes

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ebtor 1 Omar First Name Middle Name	Tarpley Last Name	Case number (if known)		
art 2: Your NONPRIORITY Unsecured Clai				
After listing any entries on this page, numb	er them beginning with 4.5, f	ollowed by 4.6, and so forth. Total claim		
.25 Valley Imaging Consultants, LLC Nonpriority Creditor's Name 2 Meridian Blvd		Last 4 digits of account number\$50.0  When was the debt incurred?		
Number Street	_	the date you file, the claim is: Check all that apply. ontingent		
Wyomissing Pennsylvania City State	19610	nliquidated isputed		
Who incurred the debt? Check one.  Debtor 1 only	<u></u>	of NONPRIORITY unsecured claim: tudent loans		
Debtor 2 only  Debtor 1 and Debtor 2 only		bligations arising out of a separation agreement or ivorce that you did not report as priority claims		
At least one of the debtors and another		ebts to pension or profit-sharing plans, and other similar ebts		
Check if this claim relates to a commu Is the claim subject to offset?  No		ther. Specify debt		
Yes				

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 Debtor 1 First Name
 Omar Middle Name
 Tarpley Last Name
 Case number (if known)

Converted Performance Management, LLC	collection agend	cy is trying to collect cy here. Similarly, if y	from you for a del you have more that	ot you owe to someo n one creditor for an	ne else, list the o	ou already listed in Parts 1 or 2. For example, if a original creditor in Parts 1 or 2, then list the at you listed in Parts 1 or 2, list the additional or 2, do not fill out or submit this page.
Number Street    Variety	Receivables Perfo	ormance Management	LLC	On which entr	y in Part 1 or Paı	rt 2 did you list the original creditor?
Number Street    Variety	00040 4415 4			Lino 4.10	of (Chaols	
Part 2: Creditors with Nonpriority Unsecured Claims				LIIIE 4.13		
City State Zip Code  Verizon Number Street  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  City State Zip Code  Pinnacie Credit Services, LLC  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  City State Zip Code  Number Street  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Last 4 digits of account number  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Last 4 digits of account number  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.22 of (Check only):  Part 1: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.22 of (Check only):  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Claims  On which entry in						
On which entry in Part 1 or Part 2 did you list the original creditor?		Washington		Last 4 digits of	f account numbe	er 5259
Dn which entry in Part 1 or Part 2 did you list the original creditor?	City	State	Zip Code			
Line 4.14   Of (Check one):   Part 1: Creditors with Priority Unsecured Claim   Part 2: Creditors with Nonpriority Unsecured Claim   Part 3: Creditors with Nonpriority Unsecured Claim   Part 4: Creditors with Nonpriority Unsecured Claim   Part 5: Creditors with Nonpriority Unsecured Claim   Par				On which ontr	v in Part 1 or Par	rt 2 did you list the original creditor?
Apharetta Georgia 30004 City State Zip Code Ponacle Credit Services, LLC  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Po Box 10587 Number Street  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 1: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Po Box 3159 Number Street  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  City State Zip Code  Last 4 digits of account number  Last 4 digits of account number  City State Zip Code  Last 4 digits of account number  Line 4.22 of (Check one):  Part 1: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.22 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  Alimington Texas Teath Arimgton Memorial Hospital  Arimgton Texas	Name			On which entry	y III Fait I OI Fai	it 2 did you list the original creditor:
Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 3: Creditors with Nonpriority Unsecured Claims   Part 3: Creditors with Nonpriority Unsecured Claims   Part 1: Creditors with Priority Unsecured Claims   Part 1: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 3: Creditors with Priority Unsecured Claims   Part 3: Creditors with Nonpriority Unsecured Claim   Part 3: Creditors with Nonpriority Unsecured Claim   Part 4: Creditors with Nonpriority Unsecured Claim   Part				Line 4.14		Part 1: Creditors with Priority Unsecured Clair
City State Zip Code    Pinnacle Credit Services, LLC	Number Stree	et			one):	
Pinnacle Credit Services, LLC Name PO Box 10587 Number Street    Ine 4.14				Last 4 digits of	f account numbe	er
On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.14	,		Zip Code			
Number Street    South Carolina   29603   City   State   Zip Code		services, LLC		On which entr	y in Part 1 or Pa	rt 2 did you list the original creditor?
Number Street    South Carolina   29603   City   State   Zip Code	PO Box 10587			Line 4.14	of (Check	Part 1: Creditors with Priority Unsecured Clair
City   State   Zip Code   C		et				Part 2: Creditors with Nonpriority Unsecured
City State Zip Code    Nationwide Credit & Collection, Inc	Greenville	South Carolina	29603			
Name    Control of Check one				Last 4 digits of	r account numbe	er
Line 4.21	Nationwide Credi	it & Collection, Inc				
Number Street    One  :   Part 2: Creditors with Nonpriority Unsecured Claims	Name			On which entr	y in Part 1 or Pa	rt 2 did you list the original creditor?
Number Street  Oak Brook Illinois 60522 City State Zip Code  Debt Recovery Solutions, LLC Name  On which entry in Part 1 or Part 2 did you list the original creditor?  P.O. Box 9001 Number Street  Westbury New York 11590 City State Zip Code  Texas Health Arlington Memorial Hospital Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Last 4 digits of account number  City State Zip Code  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  City State Zip Code  Arlington Texas 76012 City State Zip Code  Rush Copely Medical Center Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Last 4 digits of account number  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Priority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claim Part 1 or Part 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claim Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Priority Unsecured Claim Part 2: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured Claim Part 3: Creditors with Nonpriority Unsecured Claim Part 3: Creditors with Nonpriority Unsecured Claim Part 3: Creditors with Nonpriority Unsecured Claim Pa	PO Box 3159			Line 4.21	of (Check	Part 1: Creditors with Priority Unsecured Clair
Oak Brook     Illinois     60522       City     State     Zip Code       Debt Recovery Solutions, LLC       Name     On which entry in Part 1 or Part 2 did you list the original creditor?       P.O. Box 9001     Line 4.22 of (Check one):     Part 1: Creditors with Priority Unsecured Claim       Westbury     New York     11590     Last 4 digits of account number       City     State     Zip Code       Texas Health Arlington Memorial Hospital Name     On which entry in Part 1 or Part 2 did you list the original creditor?       800 W Randol Mill Rd     Line 4.22 of (Check one):     Part 1: Creditors with Priority Unsecured Claim       Number     Street     Street     Part 2: Creditors with Nonpriority Unsecured Claims       City     State     Zip Code     Last 4 digits of account number       Rush Copely Medical Center Name     On which entry in Part 1 or Part 2 did you list the original creditor?       Number     Street     On which entry in Part 1 or Part 2 did you list the original creditor?       Line 4.18     of (Check one):     Part 1: Creditors with Priority Unsecured Claim       Part 2: Creditors with Nonpriority Unsecured Claim     Part 2: Creditors with Nonpriority Unsecured Claim	Number Stree	et			one):	
Debt Recovery Solutions, LLC Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.22 of (Check one):  Westbury New York 11590 Last 4 digits of account number  City State Zip Code  Texas Health Arlington Memorial Hospital Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  City State Zip Code  Texas Health Arlington Memorial Hospital Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.22 of (Check one):  Part 1: Creditors with Nonpriority Unsecured Claim  Part 1: Creditors with Priority Unsecured Claim  Part 2: Creditors with Nonpriority Unsecured Claim  Part 1: Creditors with Nonpriority Unsecured Claim  Part 2: Creditors with Nonpriority Unsecured Claim  Part 1: Creditors with Priority Unsecured Claim  Part 2: Creditors with Priority Unsecured Claim  Part 2: Creditors with Nonpriority Unsecured Claim  Part 2: Creditors with Nonpriority Unsecured Claim  Part 2: Creditors with Nonpriority Unsecured Claim	Oak Brook	Illinois	60522	Last 4 digits of	faccount numbe	er
Number Street    Con which entry in Part 1 or Part 2 did you list the original creditor?   Line 4.22	City	State	Zip Code			<u> </u>
Number Street    New York   11590   Last 4 digits of account number		olutions, LLC		On which entr	y in Part 1 or Pa	rt 2 did you list the original creditor?
Number Street    New York   11590   Last 4 digits of account number   Claims	DO Poy 0001			Line / 22	of (Check	Doub 1. Conditions with Driegity Hannes and Claim
Westbury New York 11590 City State Zip Code  Texas Health Arlington Memorial Hospital Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.22 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  Part 1: Creditors with Priority Unsecured Claims  Arlington Texas 76012 City State Zip Code  Rush Copely Medical Center Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Last 4 digits of account number  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Claims  Part 1: Creditors with Nonpriority Unsecured Claim one):  Part 2: Creditors with Priority Unsecured Claim one):  Part 2: Creditors with Priority Unsecured Claim one):  Part 2: Creditors with Nonpriority Unsecured Claim one):  Part 2: Creditors with Nonpriority Unsecured Claim one):		et		LIII 4.22	<u> </u>	H
City State Zip Code  Texas Health Arlington Memorial Hospital Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.22 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Arlington Texas 76012 Last 4 digits of account number  City State Zip Code  Rush Copely Medical Center  Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  City State Zip Code  Con which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claim one):  Part 2: Creditors with Priority Unsecured Claim one):						
City State Zip Code  Texas Health Arlington Memorial Hospital Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.22 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Arlington Texas 76012 Last 4 digits of account number  City State Zip Code  Rush Copely Medical Center  Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  City State Zip Code  Con which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claim one):  Part 2: Creditors with Priority Unsecured Claim one):  Part 2: Creditors with Nonpriority Unsecured Claim one):	Westbury	New York	11590	Last 4 digits of	faccount numbe	
On which entry in Part 1 or Part 2 did you list the original creditor?    Solition   Street   Line 4.22   of (Check one):   Part 1: Creditors with Priority Unsecured Claim   Part 2: Creditors with Nonpriority Unsecured Claims   Part 3: Creditors with Priority Unsecured Claims   Part 4: Creditors with Priority Unsecured Claim   Part 1: Creditors with Priority Unsecured Claim   Part 2: Creditors with Nonpriority Unsecured Claim   Part 3: Creditors with Nonpriority Unsecured Claim   Part 4: Creditors with Nonpriority Unsecured Claim   Part 3: Creditors with Nonpriority Unsecured   Part 3: Creditors with Nonpriority Unsecured Claim   Part 4: Creditors with Nonpriority Unsecured   Part 3: Creditors with Nonpriority Unsecured   Part 4: Creditors with Nonpriority Unsecured   Part 3: Creditors with Nonpriority Unsecured   Part 4: Creditors with	City	State		Lust 7 digits 0		··
Line 4.22 of (Check one):  Part 1: Creditors with Priority Unsecured Claim  Part 2: Creditors with Nonpriority Unsecured Claims  Arlington Texas 76012 Last 4 digits of account number  City State Zip Code  Rush Copely Medical Center Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claim  Part 1: Creditors with Priority Unsecured Claim  Part 2: Creditors with Priority Unsecured Claim		ngton Memorial Hospi	tal			
Number Street  One):  Part 2: Creditors with Nonpriority Unsecured Claims  Arlington Texas 76012 City State Zip Code  Rush Copely Medical Center Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claim  Part 1: Creditors with Priority Unsecured Claim  Part 2: Creditors with Nonpriority Unsecured Claim	Name			On which entry	y in Part 1 or Pai	rt 2 ald you list the original creditor?
Arlington Texas 76012 City State Zip Code  Rush Copely Medical Center Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.18 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claim Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured Claim				Line 4.22		Part 1: Creditors with Priority Unsecured Clair
Arlington Texas 76012 City State Zip Code  Rush Copely Medical Center Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured	Number Stree	et			one):	
Rush Copely Medical Center Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured				Last 4 digits of	f account numbe	
Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claim  Part 2: Creditors with Nonpriority Unsecured			Zip Code			
2000 Ogden Ave Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claim  Part 2: Creditors with Nonpriority Unsecured		alcal Center		On which entr	y in Part 1 or Pa	rt 2 did you list the original creditor?
Number Street one):   Part 2: Creditors with Nonpriority Unsecured		_				_
Claims	-			Line 4.18		
	City	State	Zip Code			

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Debtor 1 Omar Tarplev Case number (if known) First Name Middle Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Dish Network Name On which entry in Part 1 or Part 2 did you list the original creditor? 9601 S Meridian Blvd Line 4.3 of (Check Part 1: Creditors with Priority Unsecured Claims one): Street Number Part 2: Creditors with Nonpriority Unsecured Englewood Colorado 80112 Last 4 digits of account number City State Zip Code Nicor Gas On which entry in Part 1 or Part 2 did you list the original creditor? Name PO Box 0632 Line 4.15 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Illinois 60507 Aurora Last 4 digits of account number City State Zip Code SBS Financial Services On which entry in Part 1 or Part 2 did you list the original creditor? Name 1818 W Belmont Ave Line 4.7 of (Check Part 1: Creditors with Priority Unsecured Claims Street one): Number Part 2: Creditors with Nonpriority Unsecured Chicago Illinois 60657 Last 4 digits of account number City Zip Code State Michael Yashar On which entry in Part 1 or Part 2 did you list the original creditor? 1818 W Belmont Ave. Line 4.7 of (Check Part 1: Creditors with Priority Unsecured Claims

one):

Last 4 digits of account number

Number

Chicago

City

Street

Illinois

State

60657

Zip Code

Part 2: Creditors with Nonpriority Unsecured

Claims

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Debtor 1 Omar Tarpley Case number (if known)
First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6.

Part 4: Add th	Part 4: Add the Amounts for Each Type of Unsecured Claim					
	Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159.  Add the amounts for each type of unsecured claim.					
			Total claims			
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00			
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00			
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00			
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00			
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00			
			Total claims			
Total claims from Part 2	6f. Student loans	6f.	\$81,998.00			
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims		\$0.00			
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$2,300.00			
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$44,419.00			
	6j. Total. Add lines 6f through 6i.	6j.	\$128,717.00			

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First Name Middle Name Last Name  Debtor 2  Spouse, if filing) First Name Middle Name Last Name
Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Northern District of Illinois (State)
Case number

#### Official Form 106G

Check if this is an amended filing

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or comp	any with whom you have	the contract or lease	State what the contract or lease is for
2.1	DLT Properties Name 202 W Main St			Residential Lease, Debtor is Lessee, Residential Lease
	Number	Street		
	Plano	Illinois	60545	
	City	State	Zip Code	

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		D00	Junion Tago	37 01 77
Fill in this info	rmation to identify your o	ase:		
Debtor 1	Omar		Tarpley	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:		District of Illinois	
	Baimaptoy Court for the.	Notation	(State)	
Case number (If known)				
				Check if this is an
Official	Form 106H			amended filing
Schedul	e H: Your Cod	debtors		12/15
No Yes  2. Within the Idaho, Lo	e last 8 years, have you uisiana, Nevada, New Me Go to line 3. . Did your spouse, forme No	xico, Puerto Rico, Texas, Wa	erty state or territory? shington, and Wisconsin ent live with you at the ti	( <i>Community property states and territories</i> include Arizona, California,
	Name of your spouse,	former spouse, or legal equiv	alent	<del></del>
	Number Street			
	City	State	Zip Cod	e e
again as	a codebtor only if that p	person is a guarantor or co	signer. Make sure you	your spouse is filing with you. List the person shown in line 2 nave listed the creditor on Schedule D (Official Form 106D), dule D, Schedule E/F, or Schedule G to fill out Column 2.
Column	I: Your codebtor			Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this in	formestics to identify	NOUN COOK					
FIII IN THIS IN	formation to identify	your case:					
Debtor 1	Omar	Ministra Nama	Tarpley		_		
Debtor 2	First Name	Middle Name	Last Name	9	Che	eck if this is:	
(Spouse, if filing	First Name	Middle Name	Last Name	<del></del>	-   🗆	An amended filing	
the:	Bankruptcy Court for	Northern	District of Illinois (State			A supplement showing posexpenses as of the following	
Case number (If known)					-	MM / DD / YYYY	
Official	Form 106I						
Schedu	le I: Your In	come					12/15
spouse. If me number (if k		l, attach a separate she y question.		_		not include informatior ional pages, write your	-
1. Fill in you	ır employment		Debtor 1			Debtor 2	
If you hav	re more than one job, eparate page with on about additional	Employment status	Employed  Not Emplo	yed		Employed  Not Employed	
employers	S.	Occupation	Uber Eats Drive	er		_	
	art time, seasonal, or byed work.	Employer's name	Uber				
		Employer's address	3640 Peachtre	e Corners Cir			
	on may include student naker, if it applies.		Number Street			Number Street	
			Apt 1702				
			Peachtree Cor	Georgia	30092	City Sta	ate Zip Code
		How long employed there?	City	State	Zip Code		
Part 2: Gi	ve Details About M	Monthly Income					
	onthly income as of ss you are separated.	the date you file this form	<b>n.</b> If you have not	ning to repor	t for any line,	write \$0 in the space. Includ	de your non-filing
			combine the info	rmation for a	ll employers fo	or that person on the lines b	oelow. If you need
more space	, attach a separate she	et to this form.		For D	ebtor 1	For Debtor 2 or non-filing spouse	
		ary, and commissions (before, calculate what the monthly			\$2,600.00	\$0.00	
	te and list monthly ove	rtime pav.	3.		+ \$0.00	+ \$0.00	

\$2,600.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Dec	otor 10mar First Name		Last Name	Case number	er <i>(if</i>		
	riist name	Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse		
С	opy line 4 here		<b>→</b> 4.	\$2,600.00	\$0.00		
5. <b>L</b> i	ist all payroll deduc						
		and Social Security deductions	5a.	\$586.73	\$0.00		
5	b. <b>Mandatory cont</b>	ributions for retirement plans	5b.	\$0.00	\$0.00		
5	ic. Voluntary contri	butions for retirement plans	5c.	\$0.00	\$0.00		
5	id. <b>Required repayr</b>	ments of retirement fund loans	5d.	\$0.00	\$0.00		
5	ie. Insurance		5e.	\$0.00	\$0.00		
5	f. Domestic suppor	rt obligations	5f.	\$0.00	\$0.00		
5	ig. <b>Union dues</b>		5g.	\$0.00	\$0.00		
5	ih. Other deduction	ns. Specify:	_ 5h. +	\$0.00	\$0.00		
6. <b>A</b> +5h.		uctions. Add lines 5a + 5b + 5c + 5d + 5e +5	f + 5g 6.	\$586.73	\$0.00		
7. <b>C</b>	alculate total mon	thly take-home pay. Subtract line 6 from line	94. 7.	\$2,013.27	\$0.00		
8. <b>L</b> i	ist all other income	e regularly received:					
8	business, profes	-					
		nt for each property and business showing dinary and necessary business expenses, and					
	the total monthly		8a.	\$0.00	\$0.00		
	b. Interest and div		8b.	\$0.00	\$0.00		
8	dependent regul	-					
		spousal support, child support, maintenance, t, and property settlement.	8c.	\$0.00	\$0.00		
8	d. Unemployment	compensation	8d.	\$0.00	\$0.00		
8	e. Social Security		8e.	\$0.00	\$750.00		
8	Include cash assis cash assistance th under the Suppler housing subsidies Specify:	nt assistance that you regularly receive stance and the value (if known) of any non-nat you receive, such as food stamps (benefits mental Nutrition Assistance Program) or s  Programs Income	8f.	\$0.00	\$660.00		
8	g. Pension or retir	ement income	8g.	\$0.00	\$0.00		
8	h. Other monthly i	ncome. Specify:	8h. +	\$0.00	\$0.00		
9. <b>A</b>	dd all other income	e Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g -	+ 8h. 9.	\$0.00	\$1,410.00		
		<b>ncome.</b> Add line $7 + \text{line } 9$ . e 10 for Debtor 1 and Debtor 2 or non-filing sp	10. oouse	\$2,013.27	\$1,410.00	=	\$3,423.27
lı fı	nclude contributions riends or relatives.	ular contributions to the expenses that you from an unmarried partner, members of your mounts already included in lines 2-10 or amou	household, you	ır dependents, your room			
S	Specify:					11. +	\$0.00
		the last column of line 10 to the amount i the Summary of Schedules and Statistical Su				12.	\$3,423.27
V	THE THAT AIRCUITT OIL	and dummary or domedures and dialistical du	raiy or ocilal	Liabiiii.03 aru Halatau D	ата, п к аррпоз		Combined
13.	Do you expect an ii ✓ No.	ncrease or decrease within the year after	you file this for	m?			monthly income
Ė	Yes. Explain:						
L							

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Fill in this infor	mation to identify you	ur case:				
Debtor 1	Omar		Tarpley			
Debtor 2	First Name	Middle Name	Last Name	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng	
United States B	ankruptcy Court for the	ne: <u>Northern</u> [	District of Illinois (State)		howing post-petition the following date:	n chapter 13
Case number				MM / DD / YYY		
				WIWI / DD / TTT	ı	
Official	Form 106.	J				
Schedul	e J: Your Ex	rpenses				12/15
information. If	•		re filing together, both are equally form. On the top of any additiona	•		nber
Part 1: Desc	cribe Your House	hold				
1. Is this a join	nt case?					
✓ No. Go	to line 2					
Yes. Do	oes Debtor 2 live in a	a separate household?				
<u>'</u>	<b>7</b> No	•				
<u> </u>	_	t file Official Forms 106 L 2. Fynar	and for Congreta Household of Dobt	a. 2		
L		st file Official Forms 1065-2, <i>Experi</i>	ses for Separate Household of Debt	or 2.		
2. Do you have	e dependents?	No				
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependen with you?	t live
200101 21		addir dopondoni	Child	23 years	No.	
				<del></del>	✓ Yes.	
			Child	17 years	No.	
					✓ Yes.	
			Child	12 years	No.	
					✓ Yes.	
	enses include people other	No				
yourself and	_	Yes				
dependents	;? 					
Part 2: Estir	nate Your Ongoir	ng Monthly Expenses				
	f a date after the ba		ou are using this form as a supple plemental Schedule J, check the			e
	•	n-cash government assistance of it on Schedule I: Your Income	-		Your	expenses
	or home ownership r the ground or lot. 4		clude first mortgage payments and		4.	\$750.00
If not incl	uded in line 4:					
4a. Real es	state taxes				4a	\$0.00
4b. Proper	ty, homeowner's, or i	renter's insurance			4b	\$0.00
4c. Home	maintenance, repair, a	and upkeep expenses			4c.	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

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Debtor 1 Omar Tarpley Case number (if known) Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           6. Utilities:         6.         \$100.00           6. Utilities:         6.         \$180.00           6. Utilities:         6.         \$180.00           6. Water, sever, garbage collection         6.         \$20.00           6. Chelephone, coll phone, Internet, stallite, and cable services         6.         \$23.00           6. Chelephone, coll phone, Internet, stallite, and cable services         6.         \$30.00           6. Chelephone, coll phone, Internet, stallite, and cable services         6.         \$30.00           6. Chelephone, coll phone, Internet, stallite, and cable services         6.         \$30.00           6. Chelephone, coll phone, Internet, stallite, and cable services         6.         \$30.00           6. Chelephone, coll phone, Internet, stallite, and cable services         6.         \$30.00           7. Coldring, Landry, and dry cleaning         6.         \$30.00           10. Chelidra and children's education         11.         \$250.00           11. Medical and dental expenses         11.         \$250.00           12. Transportation, Include age, maintenance, bus or train fave.         12.         \$30.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.	First Name	Middle Name Last Name		
Section   Sect				Your expenses
6a. Electricity, heat, natural gas	5. Additional mortgage payme	ents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$230.00           6d. Other, Specify: Cellphone (A Lines)         7.         \$793.00           7. Food and housekceping supplies         7.         \$793.00           8. Childcare and children's education costs         8.         \$0.00           9. Citothing, laundry, and dry cleaning         9.         \$55.00           10. Personal care products and services         11.         \$20.00           11. Medical and dental expenses         11.         \$20.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$250.00           10. Do not include care payements         13.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance         15         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance. Specify:         15         \$0.00           17c. Theresurents or Vehicle 2         17a         \$0.00 </td <td>6. Utilities:</td> <td></td> <td></td> <td></td>	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$330.00           6d. Other. Specify: Geliphone (4 Lines)         8d         \$190.00           7. Food and housekeeping supplies         7.         \$793.00           8. Childcare and children's education costs         8.         \$9.00           9. Clothing, laundry, and dry cleaning         9.         \$55.00           10. Personal care products and services         10.         \$130.00           11. Medical and dental expenses         11.         \$220.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$250.00           15. Instraction, environmental face.         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Instraction include insurance         15s.         \$0.00           15. Leath insurance         15s.         \$0.00           15. Leath insurance         15c.         \$10.00           15. Leath insurance.	6a. Electricity, heat, natural g	as	6a.	\$180.00
6d. Other. Specify_Celiphone (4 Lines)         6d         \$190.00           7. Food and housekeeping supplies         7.         \$793.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$55.00           10. Personal care products and services         10.         \$130.00           11. Medical and dental expenses         11.         \$20.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$250.00           10. Include car payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         15.         \$0.00           15. Insurance.         15         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15         \$0.00           15b. Health insurance         15         \$0.00           15c. Vehicle insurance. Specify:         15         \$0.00           15c. Vehicle insurance. Specify:         16         \$0.00           15c. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17a. Cax payments for Vehicle 2         17	6b. Water, sewer, garbage co	ollection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$79.00           8. Childcare and childcare's education costs         8.         9.00           9. Clothing, laundry, and dry cleaning         9.         \$55.00           10. Personal care products and services         10.         \$130.00           11. Medical and dental expenses         11.         \$20.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$250.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         156         \$0.00           15. Insurance.         156         \$0.00           15b. Health insurance ededucted from your pay or included in lines 4 or 20.         156         \$0.00           15c. Vehicle insurance. Specify:         156         \$0.00           15c. Vehicle insurance. Specify:         150         \$0.00           15c. Vehicle insurance. Specify:         170         \$0.00 <td>6c. Telephone, cell phone, Ir</td> <td>nternet, satellite, and cable services</td> <td>6c.</td> <td>\$230.00</td>	6c. Telephone, cell phone, Ir	nternet, satellite, and cable services	6c.	\$230.00
8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$55.00           10. Personal care products and services         10.         \$130.00           11. Medical and dental expenses         11.         \$20.00           12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments         12.         \$250.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15a         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a         \$0.00           15b. Health insurance         15a         \$0.00           15c. Vehicle insurance         15c         \$140.00           15d. Other insurance. Specify:         15c         \$0.00           15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17c. Other include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17a. Car payments for Vehicle 1         17a         \$0.00           17a. Other, Specify:         17c         \$0.00           17c. Other, Specify:	6d. Other. Specify: Cellpho	ne (4 Lines)	6d	\$190.00
9. Clothing, laundry, and dry cleaning         9.         \$55.00           10. Personal care products and services         10.         \$13.00           11. Medical and dental expenses         11.         \$20.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$250.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         8.         \$0.00           15. Insurance.         155.         \$0.00           15. Lie insurance deducted from your pay or included in lines 4 or 20.         15c.         \$1.00           15. Vehicle insurance         156         \$0.00           15. Vehicle insurance.         156         \$0.00           15. Vehicle insurance         156         \$0.00           15. Vehicle insurance         156         \$0.00	7. Food and housekeeping su	pplies	7.	\$793.00
10. Personal care products and services       10.       \$13.00         11. Medical and dental expenses       11.       \$20.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$250.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a.       \$0.00         15a. Life insurance       15a.       \$0.00       \$0	8. Childcare and children's ed	ducation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$20.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$250.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       13.       \$20.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a       \$0.00         15b. Health insurance       15b. Which insurance       15c. Vehicle insurance	9. Clothing, laundry, and dry o	cleaning	9.	\$55.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$250.00	10. Personal care products as	nd services	10.	\$130.00
Do not included car payments   13.   13.   3.0.00   14.   4.0.00   14.   5.0.00   14.   5.0.00   14.   5.0.00   14.   5.0.00   14.   5.0.00   15.   Insurance.   15.   Insurance deducted from your pay or included in lines 4 or 20.   15.   Insurance deducted from your pay or included in lines 4 or 20.   15.   Insurance deducted from your pay or included in lines 4 or 20.   15	11. Medical and dental expen	ses	11.	\$20.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       Do not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a. S 0.00         15b. Health insurance       15b \$0.00         15c. Vehicle insurance       15c \$140.00         15c. Vehicle insurance. Specify:       15d \$0.00         16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         17. Installment or lease payments:       16       \$0.00         17. Installment or lease payments:       17a \$0.00       \$0.00         17b. Car payments for Vehicle 1       17a \$0.00       \$0.00         17c. Other. Specify:       17c \$0.00       \$0.00         17c. Other. Specify:       17c \$0.00       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19. \$0.00         20a. Mortgages on other property       20a \$0.			12.	\$250.00
15. Insurance.	13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15a	14. Charitable contributions a	and religious donations	14.	\$0.00
15b. Health insurance       15b       \$0.00         15c. Vehicle insurance       15c       \$140.00         15d. Other insurance. Specify:       15d       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         Specify:       16       \$0.00         17. Installment or lease payments:       17a       \$0.00         17b. Car payments for Vehicle 1       17a       \$0.00         17c. Other. Specify:       17c       \$0.00         17d. Other. Specify:       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19.       \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d       \$0.00		ducted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:	15c. Vehicle insurance		15c	\$140.00
Specify:	15d. Other insurance. Specif	y:	15d	\$0.00
17.   Installment or lease payments:   17a. Car payments for Vehicle 1   17a   \$0.00   17b. Car payments for Vehicle 2   17b   \$0.00   17c. Other. Specify:   17c   \$0.00   17d. Other. Specify:   17d   \$0.00   17d. Other. Specify:   17d   \$0.00   18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18.   19. Other payments you make to support others who do not live with you.   19.   \$0.00   20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00   20b. Real estate taxes.   20b   \$0.00   20b. Real estate taxes.   20c. Property, homeowner's, or renter's insurance   20c. \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.	16. Taxes. Do not include taxes	deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. So.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17. Installment or lease paym	nents:		
17c. Other. Specify: 17d. S0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you.  Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17a. Car payments for Vehic	le 1	17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehic	le 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20c \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00				\$0.00
Specify:	, , ,	,	18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00		to support others who do not live with you.	10	\$0.00
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		ses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	19.	<del></del>
20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	20b. Real estate taxes.			
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20c. Property, homeowner's	s, or renter's insurance		
	20d. Maintenance, repair, an	d upkeep expenses.		
	20e. Homeowner's association	on or condominium dues		

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Debtor 1 Omar			Tarpley	Case number (if known)		
First N	ame	Middle Name	Last Name			
21. <b>Other.</b> Spec	eify:				21	\$0.00
22. Calculate	your monthly expenses.					\$2,738.00
22a. Add lin	es 4 through 21.					\$0.00
22b. Copy li	ine 22 (monthly expenses	for Debtor 2), if any,	from Official Form 106J-2			\$2,738.00
22c. Add lin	e 22a and 22b. The result	is your monthly expe	enses.		22.	
23. Calculate y	our monthly net income.					
23a. Copy li	ne 12 (your combined mo	nthly income) from S	Schedule I.		23a	\$3,423.27
23b. Copy y	our monthly expenses from	m line 22 above.			23b	\$2,738.00
	ct your monthly expenses f		come.			\$685.27
The re	sult is your monthly net inc	come.			23c	
For examp	ect an increase or decre	paying for your car lo	oan within the year or do ye	ou expect your		

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Fill in this information to identify your case:								
Debtor 1	Omar		Tarpley					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)					
Case number (If known)			(Cratis)					

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	nelp you fill out bankruptcy forms?
	<b>✓</b> No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary a	and schedules filed with this declaration and
	that they are true and correct.	and scriedules lifed with this declaration and
×	/s/ Omar Tarpley	×
	Signature of Debtor 1	Signature of Debtor 2
	Date <b>8/2/2018</b>	Date
	MM/DD/YYYY	MM/DD/YYYY

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Fill in th	nis infori	mation to identify your c	ase:					1		
Debtor	1	Omar			Tarp	ley				
<b>.</b>	•	First Name	Middle	Name	Last	Name				
Debtor (Spouse,		First Name	Middle	Name	Last	Name				
United	States B	ankruptcy Court for the:	Northern		District of	Illinois				
Case n						(State)				
		T 107						J		Check if this is a
Οπι	ciai	Form 107								amended filing
State	eme	nt of Financia	l Affairs f	or Ind	ividua	ls Fili	ng for l	Bankru	ıptcy	04/1
informa	ation. I	te and accurate as po i more space is neede own). Answer every q	ed, attach a sep							
Part 1:	Give	Details About Your	Marital Status	and Whe	ere You Li	ived Bef	ore			
1. V	What is	your current marital sta	atus?							
	<b>√</b> Mar	ried								
	_	married								
2. [	Ouring t	he last 3 years, have yo	ou lived anywher	e other tha	an where y	ou live no	w?			
г	□ No									
Ė		List all of the places yo	ou lived in the las	t 3 years. I	Do not inclu	ude where	you live nov	V.		
	Deb	tor 1:		Dates D	ebtor 1 live	ed D	ebtor 2:			Dates Debtor 2 lived there
							T Comp on D	abtor 1		Come as Debter 1
						L	Same as D	eptor i		Same as Debtor 1
		Alyssa St ber Street		From (	08/2014	N	umber Street			From
				To <u>(</u>	07/2016	_				То
	Plan		60545			_				
	City	State	Zip Code			C	ity	State	Zip Code	Como a sa Dalatar 1
						L	Same as D	eptor i		Same as Debtor 1
	Nun	nber Street		From		N	umber Street			From
				To _		_				То
						_				
	City	State	Zip Code			С	ity	State	Zip Code	
		last 8 years, did you e								mmunity property states
an		<i>ies</i> include Arizona, Califo	omia, idano, Louis	oiaria, Neva	ua, new Me	zkico, Puel	io nico, Texa	s, vvasningto	on, and wisconsin.)	
<b>✓</b>	4	Make sure you fill out S	chedule H. Vour	Codebtor	s (Official E	orm 106L	)			
L	] 100.1	viano sui o you iiii out si	onodulo II. IUUI	COGGDIO		J. 111 1001	<i>,</i> ·			

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		ame		
	liddle Name Last Na			
2: Explain the Sources of Your	Income			
Did you have any income from emplor Fill in the total amount of income you reactivities. If you are filing a joint case and No  Yes. Fill in the details.	eceived from all jobs and all bus	sinesses, including part-time		years?
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year unt the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$7237.99	Wages, commissions, bonuses, tips Operating a business	
For last calendar year: (January 1 to December 31, 2017  YYYY	Wages, commissions, bonuses, tips Operating a business	\$48271.00	Wages, commissions, bonuses, tips Operating a business	
For the calendar year before that:	<b>✓</b> Wages,	\$50000.00	Wages, commissions,	
(January 1 to December 31, 2016 YYYY)  Did you receive any other income dul Include income regardless of whether the	= = = = = = = = = = = = = = = = = = = =	=	bonuses, tips Operating a business	, unemployment, and othe
(January 1 to December 31, 2016 YYYY  Did you receive any other income dur	bonuses, tips Operating a business  ring this year or the two prev lat income is taxable. Examples al income; interest; dividends; m that you received together, list it	of other income are alimony; noney collected from lawsuits; only once under Debtor 1.	bonuses, tips Operating a business child support; Social Security; royalties; and gambling and	
Old you receive any other income dure Include income regardless of whether the public benefit payments; pensions; rentafiling a joint case and you have income to List each source and the gross income from No	bonuses, tips Operating a business  ring this year or the two prev lat income is taxable. Examples al income; interest; dividends; m that you received together, list it	of other income are alimony; noney collected from lawsuits; only once under Debtor 1.	bonuses, tips Operating a business child support; Social Security; royalties; and gambling and	
Old you receive any other income dure Include income regardless of whether the public benefit payments; pensions; rentafiling a joint case and you have income to List each source and the gross income from No	bonuses, tips Operating a business  ring this year or the two prev at income is taxable. Examples al income; interest; dividends; m that you received together, list it from each source separately. Do	of other income are alimony; noney collected from lawsuits; only once under Debtor 1.	bonuses, tips Operating a business  child support; Social Security; royalties; and gambling and listed in line 4.	
Did you receive any other income dural Include income regardless of whether the public benefit payments; pensions; rentafilling a joint case and you have income to List each source and the gross income for the No Yes. Fill in the details.	bonuses, tips Operating a business  ring this year or the two prev eat income is taxable. Examples al income; interest; dividends; m that you received together, list it from each source separately. Do  Debtor 1  Sources of income Describe below.  Link	of other income are alimony; noney collected from lawsuits; only once under Debtor 1.  o not include income that you  Gross income from each source (before deductions	bonuses, tips Operating a business  child support; Social Security; royalties; and gambling and listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions are
Old you receive any other income dural Include income regardless of whether the public benefit payments; pensions; rentafilling a joint case and you have income to List each source and the gross income from No	bonuses, tips Operating a business  ring this year or the two prev eat income is taxable. Examples al income; interest; dividends; m that you received together, list it from each source separately. Do  Debtor 1  Sources of income Describe below.  Link	of other income are alimony; noney collected from lawsuits; only once under Debtor 1.  o not include income that you  Gross income from each source (before deductions and exclusions)	bonuses, tips Operating a business  child support; Social Security; royalties; and gambling and listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions are
Did you receive any other income dural Include income regardless of whether the public benefit payments; pensions; rentafiling a joint case and you have income to List each source and the gross income for the No Yes. Fill in the details.  From January 1 of current year under the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and the gross income for the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions;	bonuses, tips Operating a business  ring this year or the two prevent income is taxable. Examples all income; interest; dividends; must that you received together, list it from each source separately. Do  Debtor 1  Sources of income Describe below.  Link ssi	Gross income from each source (before deductions and exclusions)  \$\frac{3}{3},300.00 \\ \$\frac{5}{2},250.00\$	bonuses, tips Operating a business  child support; Social Security; royalties; and gambling and listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions are
Did you receive any other income dural Include income regardless of whether the public benefit payments; pensions; rentafiling a joint case and you have income to List each source and the gross income for the No Yes. Fill in the details.  From January 1 of current year under the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and the gross income for the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions; rentafiling a joint case and you have income to the public benefit payments; pensions;	bonuses, tips Operating a business  ring this year or the two prevatincome is taxable. Examples all income; interest; dividends; methat you received together, list it from each source separately. Do  Debtor 1  Sources of income Describe below.  Link SSI  SSI	Gross income from each source (before deductions and exclusions)  \$3,300.00	bonuses, tips Operating a business  child support; Social Security; royalties; and gambling and listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions are
Did you receive any other income durinclude income regardless of whether the public benefit payments; pensions; rentafiling a joint case and you have income to List each source and the gross income for the No Yes. Fill in the details.  From January 1 of current year unthe date you filed for bankruptcy:  For last calendar year:	bonuses, tips Operating a business  ring this year or the two prevatincome is taxable. Examples all income; interest; dividends; methat you received together, list it from each source separately. Do  Debtor 1  Sources of income Describe below.  Link SSI SSI	Gross income from each source (before deductions and exclusions)  \$3,300.00  \$9,000.00	bonuses, tips Operating a business  child support; Social Security; royalties; and gambling and listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions are

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Debtor 1 Omar Tarplev Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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r 1	Omar				rpley	Case number	(if known)
	First Name		Middle Name	Las	st Name		
nsi orp ge	ders include your poorations of which	relatives, a you are a or a busin	ny general partner n officer, director, ess you operate a	s; relatives of any person in control	general partners; pa or owner of 20% of	artnerships of which yor more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
<b>✓</b>	No						
	Yes. List all payr	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name				-		
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	hin 1 year before der?	you filed	for bankruptcy,	did you make an	y payments or trai	nsfer any property o	n account of a debt that benefited an
	ude payments on	debts gua	ranteed or cosigne	ed by an insider.			
<b>✓</b>	No						
	Yes. List all payr	nents tha	t benefited an ins	sider.			
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
				1	1		Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

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Debtor 1 Omar Tarplev Case number (if known) First Name Middle Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property 2012 Buick Enclave \$10225 7/30/2018 AMERICAN CREDIT ACCEPT Creditor's Name Explain what happened 961 E MAIN ST Number Street Property was repossessed. Property was foreclosed. **SPARTANBURG** South Carolina 29302 Property was garnished. City State Zip Code Property was attached, seized, or levied. Value of the Describe the property Date property 2007 Nissan Maxima \$0 6/2018 HERTG ACCPT Creditor's Name Explain what happened 1420 S MICHIGAN Number Street Property was repossessed. Property was foreclosed. SOUTH BEND Indiana 46556 Property was garnished. City Zip Code State Property was attached, seized, or levied.

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Debt	or 1	Omar		Tarpley	Case number (if known	n)	
		First Name Middle Name		Last Name			
11.		thin 90 days before you filed for bankruptcy, counts or refuse to make a payment because			bank or financial institution,	set off any amou	nts from your
	<b>✓</b>	No Yes. Fill in the details.					
		ı		Describe the action th	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street	_				
			_	Last 4 digits of account	number: XXXX-		
		City State Zip Code					
12.		hin 1 year before you filed for bankruptcy, w pointed receiver, a custodian, or another offi		y of your property in the	possession of an assignee f	or the benefit of o	creditors, a court-
	<b>✓</b>	No					
		Yes					
Part	5:	List Certain Gifts and Contributions					
13.	Wi	ithin 2 years before you filed for bankruptcy,	did y	ou give any gifts with a	total value of more than \$60	0 per person?	
		Yes. Fill in the details for each gift.					
		Gifts with a total value of more than \$600 per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Code					
		Person's relationship to you					
		Person to Whom You Gave the Gift	_				
		Number Street	<u> </u>				
		City State Zip Code Person's relationship to you	<u> </u>				

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Debt	tor 1	Omar First Name	Calaba Nama	Tarpley Last Name	Case number (if known)		
		rirst Name n	Middle Name	Last Name			
14.	Wit	hin 2 years before you filed for b	oankruptcy, did you	ı give any gifts or contributio	ons with a total value of more	than \$600 to	any charity?
	✓	No					
		Yes. Fill in the details for each of	gift or contribution.				
		Gifts or contributions to charit that total more than \$600	ties	Describe what you contribu		e you tributed	Value
		Charity's Name					
		Number Street					
		City State	Zip Code				
Part	6:	List Certain Losses					
15.		hin 1 year before you filed for banbling?  No  Yes. Fill in the details.					·
		Describe the property you lost how the loss occurred	and	Describe any insurance con Include the amount that insurpending insurance claims on A/B: Property.	rance has paid. List loss		Value of property lost
Dort	7.	List Certain Payments or Tr	ranefore				
		out seeking bankruptcy or prepa ude any attorneys, bankruptcy pet No Yes. Fill in the details.			y property Date	e payment ransfer	Amount of payment
						made	paymon
		Semrad Law Firm Person Who Was Paid		Attorney's Fee - 350.00	8/2/2	2018	\$350.00
		1444 N. Farnsworth Avenue Number Street					
		Suite 300					
		Aurora Illinois City State	60505 Zip Code				
		Email or website address					
		Person Who Made the Payment,	if Not You				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address					
		Person Who Made the Payment,	if Not You				

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Debtor	1 Omar	Tarpley Ca	se number <i>(if known)</i>	
	First Name Middle Name	Last Name		
h	Ithin 1 year before you filed for bankruptcy, did elp you deal with your creditors or to make pay to not include any payment or transfer that you listed.  No	ments to your creditors?	alf pay or transfer any property to any	one who promised to
	Yes. Fill in the details.			
_		Description and value of any prop transferred	payment or transfer was made	Amount of payment
	Person Who Was Paid	-		
	Number Street	-		
	City State Zip Code	-		
<b>th</b> In	Vithin 2 years before you filed for bankruptcy, die ordinary course of your business or financial and clude both outright transfers and transfers made as not transfers that you have already listed on this state.  No  Yes. Fill in the details.	affairs? security (such as the granting of a security		
L	Tes. I ill ill the details.	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date d transfer was made
	Person Who Received Transfer	-		
	Number Street	_		
	City State Zip Code Person's relationship to you	_		
	Person Who Received Transfer	-		
	Number Street	_		
	City State Zip Code Person's relationship to you	_		
b	/ithin 10 years before you filed for bankruptcy, deneficiary? These are often called asset-protection devices.)	iid you transfer any property to a self-se	ettled trust or similar device of which	you are a
<u>-</u>	✓ No  ☐ Yes. Fill in the details.			
_	_	Description and value of the pro	perty transferred	Date transfer was made
	Name of trust			

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Debtor 1 Omar Tarplev Case number (if known) First Name Middle Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code City State Zip Code

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Debtor 1 Omar Tarplev Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code

City

State

Zip Code

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Deb	tor 1				Tarp		Ca	ase number <i>(i</i>	if known)	
		First Name	!	Middle Name	Last I	Name				
26.	Hav	e you been a party	y in any judici	al or administi	ative proceed	ding under	any environme	ental law? Ir	nclude settlements and o	rders.
	$\overline{\mathbf{V}}$	No Yes. Fill in the det	ails.							
	_				Court or ager	псу		Nature	of the case	Status of the case
		Case title			Court Name					Pending
		Case number			NumberStreet					On appeal
					City	State	Zip Code			Concluded
Part	11:	Give Details Ab	oout Your B	usiness or Co	onnections t	o Any Bu	siness			
27.	Witl	nin 4 years before	you filed for b	oankruptcy, die	d you own a bu	usiness or	have any of the	e following o	connections to any busine	ess?
		A sole propri	etor or self-er	nployed in a tra	ade, professio	on, or other	r activity, either	full-time or p	part-time	
		A member of A partner in a		lity company (l	LC) or limited	I liability pa	artnership (LLP)	)		
				naging executiv	e of a corpor	ation				
		An owner of a	at least 5% of	the voting or e	equity securitie	es of a corp	poration			
	<b>✓</b>	No. None of the a	bove applies	. Go to Part 12						
		Yes. Check all that	at apply abov	e and fill in the						
					Describ	e the natu	ure of the busin	iess	Employer Identification include Social Security	
		Business Name			_				EIN:	
		Number Street			Name o	of account	ant or bookkee	per	Dates business existed	
		City	State	Zip Code	_				From To	
					Describ	e the natu	ure of the busin	iess	Employer Identification include Social Security	
		Business Name			_				EIN:	
		Number Street			_				Dates business existed	I
		City	State	Zip Code	Name o	of account	ant or bookkee	per	From To	
		•		·						
					Describ	e the natu	ure of the busin	iess	Employer Identification include Social Security	
		Business Name			_				EIN:	
		Number Street			Name o	of account	ant or bookkee	per	Dates business existed	
		City	State	Zip Code	_				From To	

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Debt	or 1	Omar			Tarpley	Case number (if known)
	Ē	First Name		Middle Name	Last Name	
28.	cred	litors, or oth	-	r bankruptcy, did you	give a financial statement	to anyone about your business? Include all financial institutions,
	Ш	100.1	io dotalio bolovv.			
					Date issued	
		Name			MM/DD/YYYY	
		INAITIE			, 55,	
		Number S	treet			
		City	State	Zip Code		
Part	12:	Sign Belo	W			
tı	rue a	nd correct.	I understand tha	t making a false state nes up to \$250,000, on	ment, concealing property,	s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
			Signature of Debto			Signature of Debtor 2
		ļ	Date 8/2/2018			Date 8/2/2018
D	oid yo	u attach ac	ditional pages to	Your Statement of F	nancial Affairs for Individua	Is Filing for Bankruptcy (Official Form 107)?
_	N					
Ŀ						
	Y6	es				
D	id yo	u pay or ag	ree to pay some	ne who is not an atto	rney to help you fill out ban	kruptcy forms?
Γ.	✓ N	0				
	∃ ∨	es. Name of	person			Attach the Bankruptcy Petition Preparer's Notice,
	_ '					Declaration and Signature (Official Form 110)

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B2030 (Form 2030) (12/15)

### UNITED STATES BANKRUPTCY COURT

		Northern District of	Illinois	
re	Omar Tarpley		Case No.	
	Debtor			(If known)
			Chapter	Chapter 13
DI	SCLOSURE OF CO	OMPENSATION O	F ATTORNEY F	OR DEBTOR
Pursuan compens	t to 11 U.S.C. § 329(a) and Fed. sation paid to me within one yeal I or to be rendered on behalf of th	Bankr. P. 2016(b), I certify that I	am the attorney for the abo	ovenamed debtor(s) and that
	services, I have agreed to accept			\$4,000.00
Prior to t	the filing of this statement I have	received		\$350.00
Balance I	Due			\$3,650.00
2. The sour	ce of the compensation paid to r	me was:		\$3,000.00
5	<b>✓</b> Debtor	Other (specify)		
3. The sour	ce of the compensation paid to n	me is:		
5	Debtor	Other (specify)		
4. I have mem	e not agreed to share the above- bers and associates of my law fir	disclosed compensation with a	ny other person unless they	are
7110111	e agreed to share the above-disc bers or associates of my law firm eople sharing in the compensation	I. A CODY Of the agreement toge	er person or persons who ar other with a list of the names	re not s of
5. In return f	or the above-disclosed fee, I hav	e agreed to render legal service	for all aspects of the bankri	intry case including:
a. Ar	nalysis of the debtor's financial s ankruptcy;	situation, and rendering advice to	o the debtor in determining	whether to file a petition in
b. Pr	eparation and filing of any petition	on, schedules, statements of aff	fairs and plan which may be	required:
	epresentation of the debtor at the			
	epresentation of the debtor in adv			
	nent with the debtor(s), the above			
		CERTIFICATION		
I certify that btor(s) in this	the foregoing is a complete state bankruptcy proceedings.		ngement for payment to me	for representation of the
	/2/2018		fol Issues N	
	Date		/s/ James Nowak Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$353.23
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$43.23 for expenses, leaving a balance due of \$4,003.23
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	8/2/2018		
Signed:	100		
/s/ Oma	r Tarpley Amakay		
		/s/ James Nowak	
Debtor(s		Attorney for Debtor(s)	

Do not sign if the fee amounts at top of this page are blank.

#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Client,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required to pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Sections 3.1, 3.2, or 3.3 of the model plan(for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may lower that amount that the Firm will receive each month and increase the monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover



#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- a. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- b. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

Accepted:

(12378-001 AGR A0503235 DOCX)

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1.717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

		filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Tarpley, Omar	Case No	
	Debtor(s)	Chapter.	Chapter13
	VERIFIC	CATION OF CREDITOR MAT	TRIX
Th knowledge		that the attached list of creditors is to	rue and correct to the best of their
Date:	8/2/2018	/s/ Tarpley, Oma Tarpley, Omar Signature of De	

AES/FORTIS P.O. Box 2461 Harrisburg, PA, 17105

AMERICAN CREDIT ACCEPT 961 E MAIN ST SPARTANBURG, SC, 29302

CAPITAL ONE AUTO FINAN 3901 DALLAS PKWY PLANO, TX, 75093

HERTG ACCPT 1420 S MICHIGAN SOUTH BEND, IN, 46556

RENTDEBT AUTOMATED COL 2802 OPRYLAND DR NASHVILLE, TN, 37214

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

Receivables Performance Management, LLC 20816 44th Avenue Lynnwood, WA, 98036

DLT Properties 202 W Main St Plano, IL, 60545

ComEd 1919 Swift Drive Oak Brook, IL, 60523

First National Collection Bureau, Inc PO BOX 1259 Oaks, PA, 19456 Verizon Two Verizon Place Alpharetta, GA, 30004

Pinnacle Credit Services, LLC PO Box 10587 Greenville, SC, 29603

Northwestern Medicine Po Box 4090 Carol Stream, IL, 60197

Nationwide Credit & Collection, Inc PO BOX 3219 Hinsdale, IL, 60522

Pendrick Capital Partners II LLC 625 US-1 Key West, FL, 33040

Debt Recovery Solutions, LLC P.O. Box 9001 Westbury, NY, 11590

Texas Health Arlington Memorial Hospital 800 W Randol Mill Rd Arlington, TX, 76012

Illinois Department of Employment Security Benefit Collections PO Box 6996 Chicago, IL, 60606

Nandra Family Practice 115 E South St. UNIT F Plano, IL, 60545

Medical Business Bureau, LLC 1175 Devin Drive, Suite 173 Norton Shores, MI, 49441

Rush Copely Medical Center 2000 Ogden Ave Aurora, IL, 60504 Northland Group Inc PO Box 129 Thorofare, NJ, 08086

Capital One Bank c/o Blitt and Gaines PC Wheeling, IL, 60090

AFNI PO BOX 3068 Bloomington, IL, 61702

Dish Network PO Box 530714 Atlanta, GA, 30353

Harris and Harris LTD 111 W Jackson Blvd Suite 600 Chicago, IL, 60604

Nicor Gas Po Box 549 Aurora, IL, 60507

Valley Imaging Consultants, LLC PO Box 371863 Pittsburgh, PA, 15250

Cash Call Po Box 66007 Anaheim, CA, 92816

SBS Financial Services 1818 W Belmont Ave Chicago, IL, 60657

Michael Yashar 1818 W Belmont Ave. Suite 203 Chicago, IL, 60657

PLS F/K/A The Payday Loan of Illinois Inc. 800 Jorie Blvd 2nd Floor Oak Brook, IL, 60523 Chase Bank Po Box 659732 San Antonio, TX, 78265

CITIZENS BANK 1000 LAFAYETTE BLVD BRIDGEPORT, CT, 06604

Bank of America 1701 River Oaks Dr # D Calumet City, IL, 60409

Capital One Bank Po Box 30285 Salt Lake Cty, UT, 84130

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Debtor 1 Omar First Name	Middle Name	Tarpley Last Name	Case number (if know	vn)
	estions for Reporting Purpo			
16. What kind of debts do you have?	16a. Are your debts prima "incurred by an individ No. Go to line 16b Yes. Go to line 17. 16b. Are your debts prima	rily consumer deb dual primarily for a p o. rily business debts or investment or th c.	personal, family, or house s? Business debts are debts are debts are debts.	ots that you incurred to obtain be business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid the	pter 7. Do you estima		operty is excluded and administrative red creditors?
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,001	0-5,000 -10,000 01-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,0 \$50,0	00,001-\$10 million 000,001-\$50 million 000,001-\$100 million ,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,0 \$50,0	00,001-\$10 million 000,001-\$50 million 000,001-\$100 million ,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				
For you	correct.  If I have chosen to file under of title 11, United States Counder Chapter 7.  If no attorney represents me out this document, I have obtained in accordance I understand making a false.	r Chapter 7, I am aw ide. I understand the e and I did not pay of otained and read the e with the chapter of statement, conceal by case can result in 11, 1519, and 3571	vare that I may proceed, if e relief available under ea or agree to pay someone v e notice required by 11 U of title 11, United States C ing property, or obtaining in fines up to \$250,000, or	Code, specified in this petition. g money or property by fraud in r imprisonment for up to 20 years, or  Debtor 2

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Fill in this infor	mation to identify your ca	se:			
Debtor 1	Omar		Tarpley		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	LastName		
-		Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)					
Official	Form 106Dec	C			if this is led filing
Declarat	ion About on I	– ndividual Dabt	or's Schedules		
		The same of the sa			12/
· ····································	people are iming togethe	i, both are equally respon	sible for supplying correct informa	tion.	
J.S.C. §§ 152,	1341, 1519, and 3571. Below			, or imprisonment for up to 20 years, or both	
Did you p	ay or agree to pay somed	ne who is NOT an attorn	ey to help you fill out bankruptcy fo	rms?	
✓ No					
Yes.	Name of person		Attach Bankruptcy Petition Pro Signature (Official Form 119).	eparer's Notice, Declaration, and	
Under per	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed with this	declaration and	
		1.0			
X /s/ Omar	VIII	1 1	×		

Signature of Debtor 2

MM/DD/YYYY

Signature of Debtor

MM/DD/YYYY

Date 8/2/2018

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Debtor 1			Tarpley	Case number (If known)	
	First Name	Middle Name	Last Name		
28. Wi	editors, or other parti	es.	ou give a financial state	nent to anyone about your business? Include all fir	nancial institutions
			Date issued		
	Name		MM/DD/YYYY		
	Number Street		<del>-</del>		
	City	State Zip Code			
Part 12:	Sign Below				
a ba	nkruptcy case can re	sult in fines up to \$250,000	or imprisonment for up t	erty, or obtaining money or property by fraud in co o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, a	onnection with and 3571.
		of Debtor	191	Signature of Debtor 2	
	Date 8/2	2/2018		Date 8/2/2018	
Did y	ou attach additional	pages to Your Statement o	f Financial Affairs for Indi	iduals Filing for Bankruptcy (Official Form 107)?	
<u> </u>	No Yes				
Did y	ou pay or agree to pa	y someone who is not an a	torney to help you fill ou	bankruptcy forms?	
V	No				
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's No. Declaration, and Signature (Official Form 119	

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### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Tarpley, Omar	Case No	
	Debtor(s)	Case No.	
		Chapter.	Chapter13
	VERIFICAT	TON OF CREDITOR MAT	RIX
The nowledge.	above named Debtors hereby verify that	t the attached list of creditors is tr	ue and correct to the best of their
ate:	8/2/2018	/s/ Tarpley, Omai	Man Stade
		Tarpley, Omar  Signature of Deb	

## Case 18-21836 Doc 1 Filed 08/02/18 Entered 08/02/18 17:17:38 Desc Main Document Page 77 of 77

Debi	or 1 Omar First Name	Middle Name	Tarpley Last Name	Case number (if known)	
10			140-250071.746		
16.		mily income that applies to	you. Follow these	steps:	
	16a. Fill in the state in which	ch you live.	Illinois		
	16b. Fill in the number of p	people in your household.	5		
	16c. Fill in the median fam	ily income for your state and	size of		\$104,885.00
	household			o find a list of applicable median income amounts, go online	
			for this form. This I	ist may also be available at the bankruptcy clerk's office.	
17.	How do the lines compare?				
	17a. Line 15b is less the under 11 U.S.C.	han or equal to line 16c. On t § 1325(b)(3). <b>Go to Part 3.</b> [	the top of page 1 of Do NOT fill out <i>Cald</i>	f this form, check box 1, Disposable income is not determined rulation of Disposable Income (Official Form 122C-2).	
	U.S.C. § 1325(b)	than line 16c. On the top of (1/3). <b>Go to Part 3 and fill out</b> current monthly income from	t Calculation of Di	, check box 2, <i>Disposable income is determined under 11</i> sposable Income (Official Form 122C-2). On line 39 of that	
Part		mmitment Period Under		25(b)(4)	
18.		monthly income from line 1	Minimizate in the lateral property in the lateral principle		\$1,225.30
19.	Deduct the marital adjust commitment period under	tment if it applies. If you are 11 U.S.C. § 1325(b)(4) allows	e married, your sports s you to deduct par	use is not filing with you, and you contend that calculating the t of your spouse's income, copy the amount from line 13.	
	19a. If the marital adjustme	ent does not apply, fill in 0 on	line 19a.		-\$0.00
	19b. Subtract line 19a fro	om line 18.			\$1,225.30
20.	Calculate your current m	onthly income for the year.	Follow these steps		
	20a. Copy line 19b.				\$1,225.30
	Multiply by 12 (the nu	mber of months in a year).		меннования подполня п	x 12
	20b. The result is your curre	ent monthly income for the ye	ear for this part of th	ne form.	\$14,703.60
	20c. Copy the median fami	ily income for your state and s	size of household fr	om line 16c.	\$104,885.00
21,	How do the lines compare	e?			
	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.				
	Line 20b is more than 4, The commitment pe	or equal to line 20c. Unless of eriod is 5 years. Go to Part 4.	therwise ordered by	the court, on the top of page 1 of this form, check box	
art	Sign Below				
	Signature of Debto  Date 8/2/2018	W Dan Str	at the information o	n this statement and in any attachments is true and correct.  Signature of Debtor 2  Date	
	If you checked 17a, do	NOT fill out or file Form 1220		MM/DD/YYYY ne 39 of that form, copy your current monthly income from line	14